//			PART B - FEE(S)		
J	or Patents	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg Fax (703) 746-4000	applicable fee(s), to: \underline{N}	this form, together wi	Complete and send t
hould be completed whe correspondence address	ired). Blocks 1 through 5 s vill be mailed to the current and/or (b) indicating a sen	PUBLICATION FEE (if requification of maintenance fees vanew correspondence address;	nitting the ISSUE FEE and tent, advance orders and not	orm should be used for tran	INSTRUCTIONS: This fo
		·		ons. ICE ADDRESS (Note: Use Block 1 for	maniferance fee nouncation
for any other accompanyi	mailing can only be used f is certificate cannot be used al paper, such as an assignm e of mailing or transmission.	Fee(s) Transmittal, Th	y change of address)	7590 01/26/2005	
mission g deposited with the Unit st class mail in an envelo above, or being facsim late indicated below.	rtificate of Mailing or Tran his Fee(s) Transmittal is beir with sufficient postage for fi I Stop ISSUE FEE address TO (703) 746-4000, on the	I hereby certify that the States Postal Service vaddressed to the Mai transmitted to the USP	14	VER FION TTERSON BLVD, WH	JAMES M. STO NCR CORPORAT
(Depositor's nan	ie Spicer	Sall		0059 140225 09686299	/2005 MBELETE2 00000
(Signatur	25, 2005	Apri			:1501 1400.00
CONFIRMATION NO.	ATTORNEY DOCKET NO.	D INVENTOR	FIRST NAME	FILING DATE	APPLICATION NO.
5122	NCRC-0015-US (9170)	Frazier	John D	10/11/2000	09/686,299
04/26/2005	TOTAL FEE(S) DUE \$1400	PUBLICATION FEE	\$1400	NO	nonprovisional
04/20/2003	\$1400 1	·	<u> </u>		•
	J	CLASS-SUBCLASS	ART UNIT	A SHONDA T	
· · · · · · · · · · · · · · · · · · ·	of .	709-203000	2157	ASHONDA T	JACOBS, LA
	t attorneys 1 TROP, 1 member a 2 HARDE es of up to	709-203000 Iting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If	Address" (37 Orrespondence on form of a Customer 2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered		JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of
N E. STEVENS,	t attorneys 1 TROP, 1 member a 2 HARDE es of up to	709-203000 Iting on the patent front page, limes of up to 3 registered paten. OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed.	Address" (37 Orrespondence on form of a Customer 2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered listed, no	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. atton (or "Fee Address" Indication (or more recent) attached. Using the second of the second or more recent) attached.	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required.
N E. STEVENS,	a member a es of up to no name is 2 HARDE	709-203000 Iting on the patent front page, limes of up to 3 registered paten. OR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed.	Address" (37 Orrespondence on form on form of a Customer 2. For prin (1) the na or agents (2) the na registered 2 registered 2 registered isted, no PRINTED ON THE PATEN	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or more recent) attached. Use D RESIDENCE DATA TO B	JACOBS, LA 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/13 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND
N E. STEVENS,	a member a les of up to no name is 2 HARDE 3 JOHN 1	709-203000 Iting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the named patent attorneys or agents. If name will be printed.	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATEN w, no assignee data will app this form is NOT a substitute	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or more recent) attached. Us D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion	JACOBS, LA 1. Change of correspondence CFR 1.363). Change of correspond Address form PTO/SB/13 "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND
N E. STEVENS,	a member a les of up to no name is 2 HARDE 3 JOHN 1	709-203000 Iting on the patent front page, limes of up to 3 registered patent of the patent of a single firm (having as a attorney or agent) and the name of patent attorneys or agents. If ham will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. Exercise (CITY and STATE OR COUNTY)	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATEN w, no assignee data will app this form is NOT a substitute	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or more recent) attached. Use D RESIDENCE DATA TO Best an assignee is identified ben 37 CFR 3.11. Completion NEE	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02. Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in
N E. STEVENS, COWART ocument has been filed to	a member a les of up to no name is 2 HARDE 3 JOHN 1	ting on the patent front page, limes of up to 3 registered patent DR, alternatively, me of a single firm (having as a attorney or agent) and the name depatent attorneys or agents. If ame will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. EE: (CITY and STATE OR COUNTY) The patent of the patent of the patent of the patent of the patent. The patent of the patent	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT w, no assignee data will app this form is NOT a substitute (B) RESIDENCE DAYTON or ses (will not be printed on the p	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion NEE TION e assignee category or category	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT
N E. STEVENS, COWART ocument has been filed to	at attorneys I TROP, I member a es of up to no name is 3 JOHN I Dece is identified below, the of the proporation or other private grants.	ting on the patent front page, limes of up to 3 registered patent DR, alternatively, me of a single firm (having as a attorney or agent) and the name department attorneys or agents. If name will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. The (CITY and STATE OR COUNTY) The patent of the patent of the patent of the patent of the patent. The patent of the pat	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT w, no assignee data will app this form is NOT a substitute (B) RESIDENCE DAYTON os (will not be printed on the part of the payment of the paym	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion NEE TION e assignee category or category	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are
N E. STEVENS, COWART ocument has been filed to	at attorneys I TROP, I member a es of up to no name is 3 JOHN I ee is identified below, the of the proporation or other private grant closed.	709-203000 Iting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the name dipatent attorneys or agents. If name will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. EE: (CITY and STATE OR COU OH atent): Individual Cou Fee(s): In the amount of the fee(s) is en	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT w, no assignee data will app this form is NOT a substitute (B) RESIDENC DAYTON, es (will not be printed on the p	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication (or "Fee Address" Indication (or more recent) attached. Us D RESIDENCE DATA TO Be as an assignee is identified by a 37 CFR 3.11. Completion NEE TION e assignee category or category enclosed:	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are
ocument has been filed for the pup entity Government.	at attorneys I TROP, I member a es of up to no name is 3 JOHN I Dee is identified below, the of the proporation or other private grants attached. I is attached. Description of the required fee(s) or t	ting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the name dipatent attorneys or agents. If name will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. EE: (CITY and STATE OR COU OH atent): Individual CC Fee(s): in the amount of the fee(s) is emby credit card. Form PTO-2038	Address" (37 Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT ow, no assignee data will app this form is NOT a substitute (B) RESIDENCY DAYTON, es (will not be printed on the public property) 4b. Payment of A check Payment	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indication of more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified ben 37 CFR 3.11. Completion NEE FION e assignee category or category enclosed: small entity discount permittee	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are I Issue Fee Publication Fee (No si
COWART COWART Cocument has been filed to the second any overpayment, opp of this form).	at attorneys I TROP, a member a es of up to no name is 3 JOHN I ee is identified below, the of the proporation or other private groups attached. a statached. harge the required fee(s), or (enclose an extra content or other private groups attached.	ting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the name of patent attorneys or agents. If name will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. The control of the fee (S) is entire the amount of the fee (S) is entire the amount of the fee (S) is entire the control of the fee (S) in th	Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATEN w, no assignee data will app this form is NOT a substitute (B) RESIDENC DAYTON st (will not be printed on the p 4b. Payment of A check Payment The Dire Deposit Acc	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indicator more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified be an 37 CFR 3.11. Completion NEE FION e assignee category or category enclosed: small entity discount permitted of Copies	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No s. Advance Order - # of
ocument has been filed a coupentity Government open of this form).	the attorneys TROP, a member a set of up to no name is JOHN I the is identified below, the of the proporation or other private grant closed. It is attached. The image the required fee(s), or the proporation or other private grant closed. The image the required fee(s), or the proporation or other private grant closed. The image the required fee(s) are the required fee(s), or the proporation or other private grant closed.	ting on the patent front page, limes of up to 3 registered pater DR, alternatively, me of a single firm (having as a attorney or agent) and the name dipatent attorneys or agents. If name will be printed. Topint or type) ear on the patent. If an assign for filing an assignment. EE: (CITY and STATE OR COU OH atent): Individual Co Fee(s): in the amount of the fee(s) is en by credit card. Form PTO-2038 ector is hereby authorized by clount Number 14-0225	Address" (37 Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT www, no assignee data will apprent is NOT a substitute (B) RESIDENCY DAYTON, es (will not be printed on the	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indicator more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion NEE FION e assignee category or category enclosed: small entity discount permitted of Copies 6 (from status indicated above 6 MALL ENTITY status. See	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are I Issue Fee Publication Fee (No s. Advance Order - # of Change in Entity Status a. Applicant claims SI
COWART COWART	the attorneys TROP, a member a set of up to no name is JOHN I the is identified below, the of the proporation or other private grant closed. It is attached. The image the required fee(s), or the proporation or other private grant closed. The image the required fee(s), or the proporation or other private grant closed. The image the required fee(s) are the required fee(s), or the proporation or other private grant closed.	ting on the patent front page, limes of up to 3 registered paten DR, alternatively, me of a single firm (having as a attorney or agent) and the name of patent attorneys or agents. If name will be printed. To (print or type) ear on the patent. If an assign for filing an assignment. The control of the fee (S) is entire the amount of the fee (S) is entire the amount of the fee (S) is entire the control of the fee (S) in th	Address" (37 Address" (37 Orrespondence on form of a Customer PRINTED ON THE PATENT www, no assignee data will apprent is NOT a substitute (B) RESIDENCY DAYTON, es (will not be printed on the	ASHONDA T ce address or indication of "F dence address (or Change of 122) attached. ation (or "Fee Address" Indicator more recent) attached. Us D RESIDENCE DATA TO B s an assignee is identified be n 37 CFR 3.11. Completion NEE FION e assignee category or category enclosed: small entity discount permitted of Copies 6 (from status indicated above 6 MALL ENTITY status. See	JACOBS, LA 1. Change of correspondenc CFR 1.363). Change of correspond Address form PTO/SB/1: "Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. 3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN NCR CORPORAT Please check the appropriate 4a. The following fee(s) are I Issue Fee Publication Fee (No s. Advance Order - # of Change in Entity Status a. Applicant claims SI

this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.